

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT and CREDIT CARD

We are excited to offer the safety, convenience and ease of Tuition Express® – a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card. Please complete the form below to participate in our electronic payment processing program.

I hereby authorize The River Forest Community Center to initiate credit card charges to the below referenced credit card account (Section A) OR, initiate debit entries to my Checking or Savings Account, indicated below (Section B). I accept that electronic payments will be initiated on a bi-weekly basis (monthly for Kruzin Krew program) per the RFCC schedule. I am aware that I will be assessed a \$40.00 NSF/Credit Card Decline Fee for any payments that are returned as insufficient funds. To properly affect the cancellation of this agreement, I am required to give 10 days written notice.

Customer's Signature		Date			
COMPLETE ONE SECTION	ONLY				
SECTION A (Credit Card – Visa, M	asterCard, Discover)				
Cardholder Name			Phone #		
Cardholder Address	С	ity		State	Zip
Account Number			Expiration Date	CVV#	
Cardholder Signature			Date		
SECTION B (Bank Account) (Credi	it Union Members: Please	contact your Credit Union t	o verify account and ro	uting numbers for autom	atic payments).
Your Name			Phone #		
Address		City		State	Zip
Bank or Credit Union Name					
Bank or Credit Union Address	City	State	Zip	Ch	ecking Savings
Routing Transit Number (see sample below)		Accoun	t Number (see sample l	pelow)	
For Official Use Only Date Received Employee Signature	John Sample Mary Sample 123 Nice Street Anytown, USA Pay to the order of:		Φ	□□226 _ Dollars	
	11234567891 1	800338 • , 0226			

Routing Number